

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized CommitteeSECRETARY OF THE SENATE  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

15 FEB -2 PM 4:59

Brian D. Goldberg for U.S. Senate

ADDRESS (number and street) ▼

P.O. Box 356

Check if different  
than previously  
reported. (ACC)

Livingston

NJ

07039

2. FEC IDENTIFICATION NUMBER ▼

C C00558874

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

NJ

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

D D / Y Y Y Y

Y Y Y Y / Y Y Y Y

in the  
State of

M M / D D / Y Y Y Y

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

D D / Y Y Y Y

Y Y Y Y / Y Y Y Y

in the  
State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y  
11 25 2014D D / Y Y Y Y  
25 2014Y Y Y Y / Y Y Y Y  
2014

through

M M / D D / Y Y Y Y  
12 31 2014D D / Y Y Y Y  
31 2014Y Y Y Y / Y Y Y Y  
2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Daniel E. Beckman

Signature of Treasurer

Daniel E. Beckman

Date

M M / D D / Y Y Y Y  
01 29 2015D D / Y Y Y Y  
29 2015Y Y Y Y / Y Y Y Y  
2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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(Rev. 02/2003)

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